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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-878)						SERIAL NO.	FILED DATE					
						APPLICANT(S)						
						744-1054						
						CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51					
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49							99					
50							100					
TOTAL IND.							TOTAL IND.					
TOTAL DEP.							TOTAL DEP.					
TOTAL CLAIMS							TOTAL CLAIMS					

PTO-1350 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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CLAIMS ONLY							SERIAL NO.	FILING DATE
							APPLICANT(S) <i>09/144-1084</i>	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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